SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

	FOR LINE NUMBER:				PAGE	: 8	83 OF	2	213		
Use separate schedule(s) for each category of the	(check only one)										
Detailed Summary Page	X	11a		11b		11c		12			
		13		14		15		16		17	

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NAME OF COMMITTEE (In Full) American College of Surgeons	Professional Association PAC	
Full Name (Last, First, Middle Initial) Jay Johannigman Mailing Address 2708 Johnstone PI City Cincinnati FEC ID number of contributing	State Zip Code OH 45206-1822	Date of Receipt M
federal political committee. Name of Employer UC Surgeons Receipt For: Primary General Other (specify) ▼	Occupation Surgeon Aggregate Year-to-Date ▼ 340.00	
Full Name (Last, First, Middle Initial) Jay Johannigman Mailing Address 2708 Johnstone Pl City Cincinnati	State Zip Code OH 45206-1822	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
FEC ID number of contributing federal political committee. Name of Employer UC Surgeons Receipt For: Primary General	Occupation Surgeon Aggregate Year-to-Date 340.00	Amount of Each Receipt this Period 85.00
Other (specify) ▼ Full Name (Last, First, Middle Initial) Lynt Byron Johnson Mailing Address Georgetown University Hosp 4 Phc City	Date of Receipt 05 30 2013 Transaction ID: 06B4F437-CDCB-49A0-	
Washington FEC ID number of contributing federal political committee. Name of Employer Georgetown University Hospital Receipt For: Primary General Other (specify) ▼	DC 20007-2113 C Occupation Surgeon Aggregate Year-to-Date ▼ 500.00	Amount of Each Receipt this Period 500.00
SUBTOTAL of Receipts This Page (optional)	>	670.00
TOTAL This Period (last page this line number	r only)	